

2003 FORM MO-NFT

Only complete if your corporation's assets are less than or equal to \$1,000,000.

NO FRANCHISE IAX DUE		MO-NFI		•			
LAST NAME FIRS	ST NAME	MI	SOCIAL SECURITY NUMBER				
LAST NAME FIRS	ST NAME	MI	SPOUSE'S SOCIAL SECURITY NUMBER				
CITY	ST	ATE		ZIP CODE			
Zero Franchise Tax Liability — Check this box if your CORPORATION'S assets in or apportioned to Missouri are less than or equal to \$1,000,000. Note: If a corporation fails or neglects to file a Missouri corporation franchise tax report pursuant to Chapter 147, the director of revenue will notify the secretary of state to begin administrative dissolution proceedings.							
Complete the information below. (Each corporation must complete a separate Form MO-NFT.)							
PERIOD BEGINNING	PERIOD ENDING		BALANCE SHE	BALANCE SHEET DATE (MMDDYY)			
CORPORATION NAME		MITS/MO I.D. NUMBER					
CHARTER NUMBER		FEDERAL ID NUMBER					
SIGNATURE OF OFFICER		DATE SIGNED					
TITLE OF OFFICER			PHONE NUME	BER			
MO 860-3013 (11-2003)	For Privacy Notice, see	the instructions.					

MISSOURI DEPARTMENT OF REVENUE NO FRANCHISE TAX DUE		2003 FORM MO-NFT		Only complete if your corporation's assets are less than or equal to \$1,000,000.		
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AST NAME FIRST NAME		МІ	MI SPOUSE'S SOCIAL SECURITY NUMBER			
Y		FATE		ZIP CODE		
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